

Government of the District of Columbia
2003 FR-900A SUB Employer
Withholding Tax – Annual Return

039000410000

FOR OFFICIAL USE ONLY:

☒ MARK IF THIS IS YOUR FIRST RETURN OR YOUR ADDRESS IS DIFFERENT THAN YOUR LAST RETURN

TAXPAYER IDENTIFICATION NUMBER
XXXXXXXXXX

Mark ☒ if FEIN
Mark ☒ if SSN

TAX YEAR ENDING
12/31/2003

BUSINESS NAME
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

ACCOUNT ID NUMBER
XXXXXXXXXXXX

DUE DATE:
MM/DD/YY

MAILING ADDRESS LINE #1
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

MAILING ADDRESS LINE #2
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

CITY
XXXXXXXXXXXXXXXXXXXX

STATE
XX

ZIP CODE
XXXXX-XXXX

DOLLARS ONLY

1. DC INCOME TAX WITHHELD THIS YEAR.....	\$	XXXXXXXXXX . 00
2. ADJUSTMENT FOR THIS TAX YEAR ONLY.....	Mark if minus <input checked="" type="checkbox"/>	\$ XXXXXXXXXX . 00
3. TAX DUE.....	\$	XXXXXXXXXX . 00
4. PENALTY.....	\$	XXXXXXXXXX . 00
5. INTEREST.....	\$	XXXXXXXXXX . 00
6. TOTAL DUE.....	\$	XXXXXXXXXX . 00

Under penalties of law, I declare to the best of my knowledge, that this return is correct. Declaration of paid preparer is based on all the information available to the preparer.

PLEASE

SIGN

HERE

TAXPAYER'S SIGNATURE

TITLE

MM/DD/YYYY
DATE

XXX-XXX-XXXX

Telephone Number of Person to Contact

PREPARER'S SIGNATURE (If other than taxpayer)

MM/DD/YYYY
DATE

XXXXXXXXXX

Preparer's FEIN, PTIN or SSN

PAID

PREPARER

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

ONLY

FIRM NAME

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIRM ADDRESS

Make check or money order payable to the DC Treasurer.
Include your FEIN or SSN, "FR-900A" and the tax year on your payment.
Mail return and payment to: DC Office of Tax and Revenue, 6th Floor, 941 North Capitol St., NE Washington, DC 20002.